



HEALTH QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2003
OF THE CONDITION AND AFFAIRS OF THE

John Deere Health Plan, Inc.

| | | | | | | |
|---------------------------------------|---|---------------------------------------|---|---|---------------------------------------|------------|
| NAIC Group Code | 0219 <small>(Current Period)</small> | 0219 <small>(Prior Period)</small> | NAIC Company Code | 95378 | Employer's ID Number | 36-3379945 |
| Organized under the Laws of | Illinois | | | State of Domicile or Port of Entry | Illinois | |
| Country of Domicile | United States of America | | | | | |
| Licensed as business type: | Life, Accident & Health [] | | Property/Casualty [] | | Dental Service Corporation [] | |
| | Vision Service Corporation [] | | Other [] | | Health Maintenance Organization [X] | |
| | Hospital, Medical & Dental Service or Indemnity [] | | Is HMO, Federally Qualified? Yes [] No [X] | | | |
| Incorporated | 08/05/1985 | | Commenced Business | 07/01/1985 | | |
| Statutory Home Office | 1300 River Drive <small>(Street and Number)</small> | | | Moline, IL 61265 <small>(City or Town, State and Zip Code)</small> | | |
| Main Administrative Office | 1300 River Drive <small>(Street and Number)</small> | | | Moline, IL 61265 <small>(City or Town, State and Zip Code)</small> | | |
| | 309-765-1200 <small>(Area Code) (Telephone Number)</small> | | | | | |
| Mail Address | 1300 River Drive <small>(Street and Number or P.O. Box)</small> | | | Moline, IL 61265 <small>(City or Town, State and Zip Code)</small> | | |
| Primary Location of Books and Records | 1300 River Drive <small>(Street and Number)</small> | | | Moline, IL 61265 <small>(City or Town, State and Zip Code)</small> | | |
| | 309-765-1221 <small>(Area Code) (Telephone Number)</small> | | | | | |
| Internet Website Address | JohnDeereHealth.com | | | | | |
| Statutory Statement Contact | Joan G. Mincer <small>(Name)</small> | | | 309-765-1221 <small>(Area Code) (Telephone Number) (Extension)</small> | | |
| | MincerJoanG@JohnDeere.com <small>(E-mail Address)</small> | | | 309-748-1146 <small>(FAX Number)</small> | | |
| Policyowner Relations Contact | 1300 River Drive <small>(Street and Number)</small> | | | Moline, IL 61265 <small>(City or Town, State and Zip Code)</small> | | |
| | 309-765-1200 <small>(Area Code) (Telephone Number) (Extension)</small> | | | | | |

OFFICERS

| | | | |
|-----------|----------------------------|-----------|----------------------|
| President | Richard Lowell Bartsh M.D. | Secretary | Victoria Jane Graves |
| Treasurer | James Alan Cousins | | |

VICE PRESIDENTS

| | | |
|-------------------------|----------------------|---------------------------|
| Charles Phillip Parsons | David Wayne Anderson | Bruce Chase Steffens M.D. |
| Douglas Robert Niska # | | |

DIRECTORS OR TRUSTEES

| | | |
|-----------------------------------|---------------------------|----------------------------|
| James Alan Cousins | Charles Phillip Parsons | Richard Lowell Bartsh M.D. |
| James Edward Hecker | William Kenneth Appelgate | John Willard Golden M.D. |
| Cathie Sue Whiteside | Bruce Chase Steffens M.D. | Victoria Kauzlarich |
| Charlotte Hershberger Koenig M.D. | Deno James Minas # | |

State ofIllinois.....
County ofRock Island.....

The officers of this reporting entity, being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively.

| | | |
|---|-----------------------------------|---------------------------------|
| Richard Lowell Bartsh M.D. President | Victoria Jane Graves Secretary | James Alan Cousins Treasurer |
|---|-----------------------------------|---------------------------------|

Subscribed and sworn to before me this
11 day of November, 2003

Dianna S. Desherow
Senior Administrative Assistant
03/02/2007

ASSETS

| | Current Statement Date | | | 4 December 31 Prior Year Net Admitted Assets |
|---|------------------------|-----------------------------|---|---|
| | 1 Assets | 2 Nonadmitted Assets | 3 Net Admitted Assets (Cols. 1 - 2) | |
| 1. Bonds | 152,964,700 | | 152,964,700 | 126,163,076 |
| 2. Stocks: | | | | |
| 2.1 Preferred stocks | | | 0 | 0 |
| 2.2 Common stocks | 2,933,568 | | 2,933,568 | 2,648,019 |
| 3. Mortgage loans on real estate: | | | | |
| 3.1 First liens | | | 0 | 0 |
| 3.2 Other than first liens | | | 0 | 0 |
| 4. Real estate: | | | | |
| 4.1 Properties occupied by the company (less \$ encumbrances)..... | | | 0 | 0 |
| 4.2 Properties held for the production of income (less \$ encumbrances) | | | 0 | 0 |
| 4.3 Properties held for sale (less \$ encumbrances) | | | 0 | 0 |
| 5. Cash (\$0) and short -term investments (\$12,004,383) | 12,004,383 | | 12,004,383 | 36,963,870 |
| 6. Contract loans, (including \$premium notes) | | | 0 | |
| 7. Other invested assets | 0 | 0 | 0 | 0 |
| 8. Receivable for securities | | | 0 | 0 |
| 9. Aggregate write-ins for invested assets | 0 | 0 | 0 | 0 |
| 10. Subtotals, cash and invested assets (Lines 1 to 9) | 167,902,652 | 0 | 167,902,652 | 165,774,965 |
| 11. Investment income due and accrued | 1,693,431 | | 1,693,431 | 1,486,928 |
| 12. Premiums and considerations: | | | | |
| 12.1 Uncollected premiums and agents' balances in the course of collection | 17,794,564 | 2,791,581 | 15,002,983 | 6,281,673 |
| 12.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$earned but unbilled premiums)..... | | | 0 | |
| 12.3 Accrued retrospective premiums..... | | | 0 | |
| 13. Reinsurance: | | | | |
| 13.1 Amounts recoverable from reinsurers | | | 0 | 0 |
| 13.2 Funds held by or deposited with reinsured companies | | | 0 | |
| 13.3 Other amounts receivable under reinsurance contracts | | | 0 | |
| 14. Amounts receivable relating to uninsured plans | 3,645,786 | | 3,645,786 | 0 |
| 15.1 Current federal and foreign income tax recoverable and interest thereon | | | 0 | (1,468,211) |
| 15.2 Net deferred tax asset..... | 1,740,487 | 1,740,487 | 0 | 1,468,211 |
| 16. Guaranty funds receivable or on deposit | | | 0 | |
| 17. Electronic data processing equipment and software | | | 0 | 0 |
| 18. Furniture and equipment, including health care delivery assets (\$) | | | 0 | 0 |
| 19. Net adjustment in assets and liabilities due to foreign exchange rates | | | 0 | 0 |
| 20. Receivables from parent, subsidiaries and affiliates | | | 0 | 0 |
| 21. Health care (\$346,399) and other amounts receivable..... | 346,399 | 345,268 | 1,131 | 1,331 |
| 22. Other assets nonadmitted | | | 0 | 0 |
| 23. Aggregate write-ins for other than invested assets | 40,699 | 40,699 | 0 | 11,274,476 |
| 24. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 10 to 23)..... | 193,164,018 | 4,918,035 | 188,245,983 | 184,819,373 |
| 25. From Separate Accounts, Segregated Accounts and Protected Cell Accounts..... | | | 0 | |
| 26. Total (Lines 24 and 25) | 193,164,018 | 4,918,035 | 188,245,983 | 184,819,373 |
| DETAILS OF WRITE-INS | | | | |
| 0901. | | | | |
| 0902. | | | | |
| 0903. | | | | |
| 0998. Summary of remaining write-ins for Line 9 from overflow page | 0 | 0 | 0 | 0 |
| 0999. Totals (Lines 0901 thru 0903 plus 0998)(Line 9 above) | 0 | 0 | 0 | 0 |
| 2301. Other Accounts Receivable..... | 40,699 | 40,699 | 0 | 11,274,476 |
| 2302. | | | | |
| 2303. | | | | |
| 2398. Summary of remaining write-ins for Line 23 from overflow page | 0 | 0 | 0 | 0 |
| 2399. Totals (Lines 2301 thru 2303 plus 2398)(Line 23 above) | 40,699 | 40,699 | 0 | 11,274,476 |

LIABILITIES, CAPITAL AND SURPLUS

| | Current Period | | | Prior Year |
|--|------------------|----------------|------------------|------------------|
| | 1 Covered | 2 Uncovered | 3 Total | 4 Total |
| 1. Claims unpaid (less \$0 reinsurance ceded) |90,948,958 |6,294,330 |97,243,289 |82,425,277 |
| 2. Accrued medical incentive pool and bonus payments |2,013,700 | |2,013,700 |3,088,875 |
| 3. Unpaid claims adjustment expenses | | |0 |0 |
| 4. Aggregate health policy reserves | | |0 |0 |
| 5. Aggregate life policy reserves | | |0 | |
| 6. Property/casualty unearned premium reserve | | |0 | |
| 7. Aggregate health claim reserves | | |0 |0 |
| 8. Premiums received in advance |7,801,903 | |7,801,903 |14,943,580 |
| 9. General expenses due or accrued |2,529,480 | |2,529,480 |3,840,382 |
| 10.1 Current federal and foreign income tax payable and interest thereon (including \$0 on realized capital gains (losses)) |215,125 | |215,125 |571,421 |
| 10.2 Net deferred tax liability..... | | |0 |0 |
| 11. Ceded reinsurance premiums payable | | |0 | |
| 12. Amounts withheld or retained for the account of others | | |0 |0 |
| 13. Remittances and items not allocated | | |0 | |
| 14. Borrowed money (including \$ current) and interest thereon \$ (including \$ current) | | |0 |0 |
| 15. Amounts due to parent, subsidiaries and affiliates |575,362 | |575,362 |273,522 |
| 16. Payable for securities | | |0 |0 |
| 17. Funds held under reinsurance treaties with (\$ authorized reinsurers and \$unauthorized reinsurers) | | |0 |0 |
| 18. Reinsurance in unauthorized companies | | |0 |0 |
| 19. Net adjustments in assets and liabilities due to foreign exchange rates | | |0 |0 |
| 20. Liability for amounts held under uninsured accident and health plans | | |0 |0 |
| 21. Aggregate write-ins for other liabilities (including \$ current) |655,433 |0 |655,433 |126,433 |
| 22. Total liabilities (Lines 1 to 21)..... |104,739,961 |6,294,330 |111,034,291 |105,269,491 |
| 23. Common capital stock |XXX |XXX |611,000 |611,000 |
| 24. Preferred capital stock |XXX |XXX | |0 |
| 25. Gross paid in and contributed surplus |XXX |XXX |22,440,000 |22,440,000 |
| 26. Surplus notes |XXX |XXX | |0 |
| 27. Aggregate write-ins for other than special surplus funds |XXX |XXX |1,500,000 |1,500,000 |
| 28. Unassigned funds (surplus) |XXX |XXX |52,660,692 |54,998,883 |
| 29. Less treasury stock, at cost: | | | | |
| 29.1shares common (value included in Line 23) \$) |XXX |XXX | |0 |
| 29.2shares preferred (value included in Line 24) \$) |XXX |XXX | |0 |
| 30. Total capital and surplus (Lines 23 to 28 minus Line 29) |XXX |XXX |77,211,692 |79,549,883 |
| 31. Total liabilities, capital and surplus (Lines 22 and 30) |XXX |XXX |188,245,983 |184,819,373 |
| DETAILS OF WRITE-INS | | | | |
| 2101. Payables From Cost Contracts..... |200,143 | |200,143 |123,224 |
| 2102. Payable to CMS..... | | |0 |3,209 |
| 2103. State Income Taxes Payable..... |313,574 | |313,574 |0 |
| 2198. Summary of remaining write-ins for Line 21 from overflow page |141,716 |0 |141,716 |0 |
| 2199. Totals (Lines 2101 thru 2103 plus 2198) (Line 21 above) |655,433 |0 |655,433 |126,433 |
| 2701. Reserve and Restricted Funds..... |XXX |XXX |1,500,000 |1,500,000 |
| 2702. |XXX |XXX | | |
| 2703. |XXX |XXX | | |
| 2798. Summary of remaining write-ins for Line 27 from overflow page |XXX |XXX |0 |0 |
| 2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above) |XXX |XXX |1,500,000 |1,500,000 |

STATEMENT OF REVENUE AND EXPENSES

| | Current Year to Date | | Prior Year To Date |
|--|----------------------|-------------|--------------------|
| | 1 Uncovered | 2 Total | 3 Total |
| 1. Member Months..... | XXX | 2,090,742 | 2,236,006 |
| 2. Net premium income (including0 non-health premium income)..... | XXX | 477,340,908 | 451,838,516 |
| 3. Change in unearned premium reserves and reserve for rate credits | XXX | | 0 |
| 4. Fee-for-service (net of \$ medical expenses) | XXX | | 0 |
| 5. Risk revenue | XXX | | 0 |
| 6. Aggregate write-ins for other health care related revenues | XXX | 3,256 | 232,290 |
| 7. Aggregate write-ins for other non-health revenues | XXX | 0 | 0 |
| 8. Total revenues (Lines 2 to 7) | XXX | 477,344,163 | 452,070,806 |
| Hospital and Medical: | | | |
| 9. Hospital/medical benefits | 22,154,229 | 344,016,861 | 328,025,909 |
| 10. Other professional services | 1,080,750 | 10,117,733 | 11,086,648 |
| 11. Outside referrals | | | 0 |
| 12. Emergency room and out-of-area | 385,612 | 9,871,796 | 13,219,378 |
| 13. Prescription drugs | | 50,949,161 | 54,011,187 |
| 14. Aggregate write-ins for other hospital and medical..... | 0 | 0 | 0 |
| 15. Incentive pool and withhold adjustments | | (4,560,566) | (15,692,828) |
| 16. Subtotal (Lines 9 to 15) | 23,620,591 | 410,394,986 | 390,650,295 |
| Less: | | | |
| 17. Net reinsurance recoveries | | 46,865 | 262,283 |
| 18. Total hospital and medical (Lines 16 minus 17) | 23,620,591 | 410,348,121 | 390,388,012 |
| 19. Non-health claims | | | |
| 20. Claims adjustment expenses | | 8,637,776 | 10,281,502 |
| 21. General administrative expenses..... | | 57,486,574 | 50,380,072 |
| 22. Increase in reserves for life and accident and health contracts including \$ increase in reserves for life only)..... | | | 0 |
| 23. Total underwriting deductions (Lines 18 through 22) | 23,620,591 | 476,472,471 | 451,049,586 |
| 24. Net underwriting gain or (loss) (Lines 8 minus 23) | XXX | 871,692 | 1,021,219 |
| 25. Net investment income earned | | 5,774,707 | 6,608,510 |
| 26. Net realized capital gains or (losses) | | 345,594 | 84,999 |
| 27. Net investment gains or (losses) (Lines 25 plus 26) | 0 | 6,120,301 | 6,693,509 |
| 28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$) (amount charged off \$)] | | | 0 |
| 29. Aggregate write-ins for other income or expenses | 0 | (15,690) | (17,604) |
| 30. Net income or (loss) before federal income taxes (Lines 24 plus 27 plus 28 plus 29) | XXX | 6,976,303 | 7,697,124 |
| 31. Federal and foreign income taxes incurred | XXX | 2,429,577 | 2,859,271 |
| 32. Net income (loss) (Lines 30 minus 31) | XXX | 4,546,726 | 4,837,853 |
| DETAILS OF WRITE-INS | | | |
| 0601. Contractual Recoveries..... | XXX | | 0 |
| 0602. Audit Recoveries..... | XXX | 3,256 | 232,290 |
| 0603. Miscellaneous Recoveries..... | XXX | | 0 |
| 0698. Summary of remaining write-ins for Line 6 from overflow page | XXX | 0 | 0 |
| 0699. Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above) | XXX | 3,256 | 232,290 |
| 0701. | XXX | | |
| 0702. | XXX | | |
| 0703. | XXX | | |
| 0798. Summary of remaining write-ins for Line 7 from overflow page | XXX | 0 | 0 |
| 0799. Totals (Lines 0701 thru 0703 plus 0798) (Line 7 above) | XXX | 0 | 0 |
| 1401. | | | |
| 1402. | | | |
| 1403. | | | |
| 1498. Summary of remaining write-ins for Line 14 from overflow page | 0 | 0 | 0 |
| 1499. Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above) | 0 | 0 | 0 |
| 2901. Massachusetts Uncompensated Care Surcharge..... | | (30) | (31) |
| 2902. Other Income (Loss)..... | | (15,659) | (17,572) |
| 2903. | | | |
| 2998. Summary of remaining write-ins for Line 29 from overflow page | 0 | 0 | 0 |
| 2999. Totals (Lines 2901 thru 2903 plus 2998) (Line 29 above) | 0 | (15,690) | (17,604) |

CAPITAL AND SURPLUS ACCOUNT

| | 1 Current Year to Date | 2 Prior Year |
|--|------------------------------|-----------------|
| CAPITAL AND SURPLUS ACCOUNT: | | |
| 33. Capital and surplus prior reporting period | 79,549,883 | 74,293,510 |
| GAINS AND LOSSES TO CAPITAL & SURPLUS: | | |
| 34. Net income or (loss) from Line 32 | 4,546,726 | 6,495,598 |
| 35. Change in valuation basis of aggregate policy and claim reserves | | 0 |
| 36. Net unrealized capital gains and losses | 185,607 | (716,707) |
| 37. Change in net unrealized foreign exchange capital gain or (loss) | | 0 |
| 38. Change in net deferred income tax | | 0 |
| 39. Change in nonadmitted assets | (932,242) | 224,329 |
| 40. Change in unauthorized reinsurance | 0 | 0 |
| 41. Change in treasury stock | | 0 |
| 42. Change in surplus notes | 0 | 0 |
| 43. Cumulative effect of changes in accounting principles | | 0 |
| 44. Capital Changes: | | |
| 44.1 Paid in | | 0 |
| 44.2 Transferred from surplus (Stock Dividend) | | 0 |
| 44.3 Transferred to surplus | | 0 |
| 45. Surplus adjustments: | | |
| 45.1 Paid in | | 0 |
| 45.2 Transferred to capital (Stock Dividend) | 0 | 0 |
| 45.3 Transferred from capital | | 0 |
| 46. Dividends to stockholders | (6,400,000) | 0 |
| 47. Aggregate write-ins for gains or (losses) in surplus | 261,718 | (746,847) |
| 48. Net change in capital & surplus (Lines 34 to 47) | (2,338,191) | 5,256,374 |
| 49. Capital and surplus end of reporting period (Line 33 plus 48) | 77,211,692 | 79,549,883 |
| DETAILS OF WRITE-INS | | |
| 4701. Change in Non-Admitted assets Affecting Net Income..... | 506,653 | (2,092,385) |
| 4702. Change in Accrual affecting Net Income..... | (758,148) | 1,858,751 |
| 4703. Change in GAAP vs Statutory Value of Short Term Investments..... | 513,213 | (513,213) |
| 4798. Summary of remaining write-ins for Line 47 from overflow page | 0 | 0 |
| 4799. Totals (Lines 4701 thru 4703 plus 4798) (Line 47 above) | 261,718 | (746,847) |

Report #2A: TENNCARE OPERATIONS STATEMENT OF REVENUES AND EXPENSES

| | 2003 | | 2002 |
|--|----------------|--------------------|---------------|
| | CURRENT PERIOD | YEAR TO DATE TOTAL | TOTAL |
| MEMBER MONTHS | 239,575 | 716,511 | 731,941 |
| REVENUES: | | | |
| 1. TennCare Capitation | 32,760,104 | 123,210,384 | \$120,807,787 |
| 2. Adverse Selection | 0 | 0 | 0 |
| 3. Total TennCare Revenue (Lines 1 and 2) | 32,760,104 | 123,210,384 | 120,807,787 |
| 4. Investment | 32,133 | 88,804 | 1,057,715 |
| 5. Other Revenue (Provide detail) | 0 | 0 | 0 |
| 6. TOTAL REVENUES (Lines 3 to 5) | 32,792,237 | 123,299,188 | 121,865,502 |
| EXPENSES: | | | |
| Medical and Hospital Services: | | | |
| 7. Capitated Physician Services | 0 | 0 | 0 |
| 8. Fee-for Service Physician Services | 10,916,736 | 32,976,929 | 31,308,483 |
| 9. Inpatient Hospital Services | 6,946,592 | 21,174,064 | 29,767,072 |
| 10. Outpatient Services | 2,548,264 | 10,911,109 | 13,679,754 |
| 11. Emergency Room Services | 1,813,985 | 6,414,158 | 7,111,310 |
| 12. Mental Health Services | 0 | 0 | 0 |
| 13. Dental Services | 0 | 29,297 | 1,948,933 |
| 14. Vision Services | 155,308 | 397,347 | 394,380 |
| 15. Pharmacy Services | 2,984,587 | 27,575,786 | 27,100,051 |
| 16. Home Health Services | 839,730 | 2,183,438 | 2,162,969 |
| 17. Chiropractic Services | 0 | 0 | 0 |
| 18. Radiology Services | 977,056 | 2,668,397 | 2,138,092 |
| 19. Laboratory Services | 1,359,716 | 3,760,145 | 3,184,170 |
| 20. Durable Medical Equipment Services | 706,493 | 2,917,978 | 369,432 |
| 21. Transportation Services | 393,764 | 1,177,402 | 1,232,167 |
| 22. Outside Referrals | 0 | 0 | 0 |
| 23. Medical Incentive Pool and Withhold Adjustments | (0) | (270,585) | (5,222,704) |
| 24. Occupancy, Depreciation, and Amortization | 0 | 0 | 0 |
| 25. Other Medical and Hospital Services (Provide Detail) | 21,478 | 1,577,120 | (6,375,189) |
| 26. Subtotal (Lines 7 to 25) | 29,663,710 | 113,492,586 | 108,798,918 |
| LESS: | | | |
| 27. Net Reinsurance Recoveries Incurred | 0 | 0 | 164,077 |
| 28. Copayments | 0 | 0 | 0 |
| 29. Subrogation and Coordination of Benefits | 0 | 0 | 0 |
| 30. Subtotal (Lines 27 to 29) | 0 | 0 | 164,077 |
| 31 TOTAL MEDICAL AND HOSPITAL (Lines 26 minus line 30) | 29,663,710 | 113,492,586 | 108,634,841 |
| Administration: | | | |
| 32. Compensation | 2,045,738 | 6,073,155 | 9,056,376 |
| 33. Marketing | 76,531 | 227,198 | 373,784 |
| 34. Interest Expense | 0 | 0 | 0 |
| 35. Premium Tax Expense | 655,845 | 2,465,984 | 2,417,145 |
| 36. Occupancy, Depreciation and Amortization | 350,413 | 1,040,265 | 1,593,755 |
| 37. Other Administration (Provide detail) | 0 | 0 | 0 |
| 38. TOTAL ADMINISTRATION (Lines 32 to 37) | 3,128,527 | 9,806,602 | 13,441,060 |
| 39. TOTAL EXPENSES (Lines 31 and 38) | 32,792,237 | 123,299,188 | 122,075,901 |
| 40. Extraordinary Item | | | |
| 41. Provision for Income Tax | 0 | 0 | (73,640) |
| 39. NET INCOME (LOSS) (Line 6 less Lines 39, 40, and 41) | \$0 | (\$0) | (\$136,759) |
| Write-ins: | | | |
| REVENUES: | | | |
| Line 5 Contractual Recoveries | 0 | 0 | 0 |
| Line 5 Deferral of Revenue for Administration fee Risk | 0 | 0 | 0 |
| EXPENSES: | | | |
| Line 25 Reinsurance Expense | 0 | 0 | 57,875 |
| Line 25 Nurseline | 21,478 | 64,222 | 48,986 |
| Line 25 Risk Sharing (Option #2) New Risk Arrangement | (0) | 1,512,898 | (7,575,506) |
| Line 25 Risk Sharing during Exigency | 0 | 0 | (641,540) |

CASH FLOW

| | 1 Current Year To Date | 2 Prior Year Ended December 31 |
|---|------------------------------|--------------------------------------|
| Cash from Operations | | |
| 1. Premiums collected net of reinsurance..... | 460,808,533 | 590,092,142 |
| 2. Net investment income | 5,881,639 | 9,068,198 |
| 3. Miscellaneous income | (12,434) | 265,236 |
| 4. Total (Lines 1 to 3) | 466,677,738 | 599,425,576 |
| 5. Benefits and loss related payments | 396,758,052 | 520,256,213 |
| 6. Net transfers to Separate, Segregated Accounts and Protected Cell Accounts..... | | |
| 7. Commissions, expenses paid and aggregate write-ins for deductions | 67,435,252 | 79,642,928 |
| 8. Dividends paid to policyholders | | |
| 9. Federal and foreign income taxes paid (recovered) \$ net tax on capital gains (losses) | 2,785,873 | 6,937,108 |
| 10. Total (Lines 5 through 9) | 466,979,177 | 606,836,249 |
| 11. Net cash from operations (Line 4 minus Line 10) | (301,439) | (7,410,673) |
| Cash from Investments | | |
| 12. Proceeds from investments sold, matured or repaid: | | |
| 12.1 Bonds | 42,873,465 | 40,936,830 |
| 12.2 Stocks | 0 | 6,977,899 |
| 12.3 Mortgage loans | 0 | 0 |
| 12.4 Real estate | 0 | 0 |
| 12.5 Other invested assets | 0 | 0 |
| 12.6 Net gains or (losses) on cash and short-term investments | 0 | 0 |
| 12.7 Miscellaneous proceeds | 0 | 0 |
| 12.8 Total investment proceeds (Lines 12.1 to 12.7) | 42,873,465 | 47,914,729 |
| 13. Cost of investments acquired (long-term only): | | |
| 13.1 Bonds | 69,297,335 | 30,842,623 |
| 13.2 Stocks | 0 | 0 |
| 13.3 Mortgage loans | 0 | 0 |
| 13.4 Real estate | 0 | 0 |
| 13.5 Other invested assets | 0 | 0 |
| 13.6 Miscellaneous applications | 0 | 0 |
| 13.7 Total investments acquired (Lines 13.1 to 13.6) | 69,297,335 | 30,842,623 |
| 14. Net increase (or decrease) in policy loans and premium notes | 0 | |
| 15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14) | (26,423,870) | 17,072,106 |
| Cash from Financing and Miscellaneous Sources | | |
| 16. Cash provided (applied): | | |
| 16.1 Surplus notes, capital notes | 0 | |
| 16.2 Capital and paid in surplus, less treasury stock..... | 0 | |
| 16.3 Borrowed funds received..... | 0 | 0 |
| 16.4 Net deposits on deposit-type contracts and other insurance liabilities | | |
| 16.5 Dividends to stockholders | 6,400,000 | 0 |
| 16.6 Other cash provided (applied)..... | 8,165,822 | (613,142) |
| 17. Net cash from financing and miscellaneous sources (Line 16.1 to Line 16.4 minus Line 16.5 plus Line 16.6) | 1,765,822 | (613,142) |
| RECONCILIATION OF CASH AND SHORT-TERM INVESTMENTS | | |
| 18. Net change in cash and short-term investments (Line 11 plus Line 15 plus Line 17) | (24,959,487) | 9,048,291 |
| 19. Cash and short-term investments: | | |
| 19.1 Beginning of period | 36,963,870 | 27,915,579 |
| 19.2 End of period (Line 18 plus Line 19.1)..... | 12,004,383 | 36,963,870 |

STATEMENT AS OF SEPTEMBER 30, 2003 OF THE John Deere Health Plan, Inc.

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

| | 1 | Comprehensive (Hospital & Medical) | | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
|---|-------------|---------------------------------------|-------------|------------------------|----------------|----------------|--|-------------------------|-----------------------|--------------|----------------------|-------------------|------------|
| | | 2 | 3 | | | | | | | | | | |
| | Total | Individual | Group | Medicare Supplement | Vision Only | Dental Only | Federal Employees Health Benefit Plan | Title XVIII Medicare | Title XIX Medicaid | Stop Loss | Disability Income | Long-Term Care | Other |
| Total Members at end of: | | | | | | | | | | | | | |
| 1. Prior Year | 206,584 | 0 | 153,348 | 0 | 0 | 0 | 0 | 19,498 | 33,738 | | | | 0 |
| 2 First Quarter | 230,635 | 0 | 176,029 | 0 | 0 | 0 | 0 | 20,221 | 34,385 | 0 | 0 | 0 | 0 |
| 3 Second Quarter | 236,421 | 0 | 179,833 | 0 | 0 | 0 | 0 | 21,093 | 35,495 | 0 | 0 | 0 | 0 |
| 4. Third Quarter | 220,467 | | 189,423 | | | | | 21,897 | 9,147 | | | | |
| 5. Current Year | 0 | | | | | | | | | | | | |
| 6 Current Year Member Months | 2,090,742 | | 1,618,742 | | | | | 187,291 | 284,709 | | | | |
| Total Member Ambulatory Encounters for Period: | | | | | | | | | | | | | |
| 7. Physician | 1,026,310 | | 683,826 | | | | | 200,214 | 142,270 | | | | |
| 8. Non-Physician | 203,848 | | 154,936 | | | | | 22,458 | 26,454 | | | | |
| 9. Total | 1,230,158 | 0 | 838,762 | 0 | 0 | 0 | 0 | 222,672 | 168,724 | 0 | 0 | 0 | 0 |
| 10. Hospital Patient Days Incurred | 85,844 | | 37,523 | | | | | 33,410 | 14,911 | | | | |
| 11. Number of Inpatient Admissions | 19,255 | | 9,661 | | | | | 5,062 | 4,532 | | | | |
| 12. Health Premiums Collected | 462,871,323 | | 310,661,424 | | | | 6,827,369 | 93,155,741 | 39,272,130 | | | | 12,954,659 |
| 13. Life Premiums Direct..... | 0 | | | | | | | | | | | | |
| 14. Property/Casualty Premiums Written | 0 | | | | | | | | | | | | |
| 15. Health Premiums Earned | 478,014,449 | | 326,537,782 | | | | 6,619,255 | 92,630,623 | 39,272,130 | | | | 12,954,659 |
| 16. Property/Casualty Premiums Earned | 0 | | | | | | | | | | | | |
| 17. Amount Paid for Provision of Health Care Services | 395,392,127 | | 262,925,449 | | | | 5,803,204 | 76,380,622 | 39,179,591 | | | | 11,103,261 |
| 18. Amount Incurred for Provision of Health Care Services | 410,394,985 | | 275,551,452 | | | | 6,362,681 | 79,253,714 | 37,828,287 | | | | 11,398,851 |

CLAIMS PAYABLE (Reported and Unreported)

∞

UNDERWRITING AND INVESTMENT EXHIBIT
ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

| Line of Business | Claims Paid Year to Date | | Liability End of Current Quarter | | 5 Claims Incurred in Prior Years (Columns 1 + 3) | 6 Estimated Claim Reserve and Claim Liability Dec. 31 of Prior Year |
|---|---|---|--|---|---|--|
| | 1 On Claims Incurred Prior to January 1 of Current Year | 2 On Claims Incurred During the Year | 3 On Claims Unpaid Dec. 31 of Prior Year | 4 On Claims Incurred During the Year | | |
| 1. Comprehensive (hospital & medical) | 34,776,300 | 230,138,371 | (1,195) | 55,310,716 | 34,775,105 | 49,829,065 |
| 2. Medicare Supplement | | | | | .0 | .0 |
| 3. Dental Only | | | | | .0 | .0 |
| 4. Vision Only | | | | | .0 | .0 |
| 5. Federal Employees Health Benefits Plan Premiums | 1,059,795 | 5,475,285 | | 1,337,000 | 1,059,795 | 1,204,000 |
| 6. Title XVIII - Medicare | 14,218,414 | 68,695,620 | 225,156 | 23,061,473 | 14,443,570 | 16,471,309 |
| 7. Title XIX - Medicaid | 10,732,857 | 30,860,911 | 7,763,356 | 9,546,783 | 18,496,213 | 14,920,900 |
| 8. Other Health | | | | | .0 | .0 |
| 9. Health Subtotal (Lines 1 to 8)..... | 60,787,366 | 335,170,187 | 7,987,317 | 89,255,972 | 68,774,683 | 82,425,274 |
| 10. Other non-health | | | | | .0 | |
| 11. Medical incentive pools, accruals and disbursements | 5,208,295 | (4,560,566) | | 2,013,700 | 5,208,295 | 3,088,875 |
| 12. Totals | 65,995,661 | 330,609,621 | 7,987,317 | 91,269,672 | 73,982,978 | 85,514,149 |

NOTES TO FINANCIAL STATEMENTS

17c. Wash Sales

The plan did not engage in wash sales.

No events have occurred subsequent to the end of the most recent fiscal year which have a material impact on John Deere Health Plan, Inc.

GENERAL INTERROGATORIES

(Responses to these interrogatories should be based on changes that have occurred since the prior year end unless otherwise noted.)

PART 1 - COMMON INTERROGATORIES
GENERAL

- 1.1

Did the reporting entity implement any significant accounting policy changes which would require disclosure in the Notes to the Financial Statements?

Yes [] No [X]
- 1.2

If yes, explain:
.....
- 2.1

Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act?

Yes [X] No []
- 2.2

If yes, has the report been filed with the domiciliary state?

Yes [X] No []
- 3.1

Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?

Yes [X] No []
- 3.2

If yes, date of change:
If not previously filed, furnish herewith a certified copy of the instrument as amended.

08/14/2003
4.

Have there been any substantial changes in the organizational chart since the prior quarter end?
If yes, attach an explanation.

Yes [] No [X]
- 5.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?

Yes [] No [X]
- 5.2

If yes, provide the name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

| 1 Name of Entity | 2 NAIC Company Code | 3 State of Domicile |
|---------------------|------------------------|------------------------|
| | | |
| | | |
| | | |

6.

If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved?

Yes [] No [X] NA []

If yes, attach an explanation.
- 7.1

State as of what date the latest financial examination of the reporting entity was made or is being made.

06/30/1998
- 7.2

State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.

06/30/1998
- 7.3

State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).

06/30/1998
- 7.4

By what department or departments?
Illinois Department of Insurance.....
- 8.1

Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? (You need not report an action, either formal or informal, if a confidentiality clause is part of the agreement.)

Yes [] No [X]
- 8.2

If yes, give full information:
.....
- 9.1

Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?.....

Yes [] No [X]
- 9.2

If response to 9.1 is yes, please identify the name of the bank holding company.
.....
- 9.3

Is the company affiliated with one or more banks, thrifts or securities firms?.....

Yes [] No [X]
- 9.4

If response to 9.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Office of Thrift Supervision (OTS), the Federal Deposit Insurance Corporation (FDIC and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

| 1 Affiliate Name | 2 Location (City, State) | 3 FRB | 4 OCC | 5 OTS | 6 FDIC | 7 SEC |
|---------------------|--------------------------------|----------|----------|----------|-----------|----------|
| | | | | | | |
| | | | | | | |
| | | | | | | |

GENERAL INTERROGATORIES

(Responses to these interrogatories should be based on changes that have occurred since the prior year end unless otherwise noted.)

INVESTMENT

10.1 Has there been any change in the reporting entity's own preferred or common stock? Yes [] No [X]

10.2 If yes, explain:
.....

11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) Yes [] No [X]

11.2 If yes, give full and complete information relating thereto:
.....

12. Amount of real estate and mortgages held in other invested assets in Schedule BA:\$0

13. Amount of real estate and mortgages held in short-term investments:\$0

14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes [] No [X]

14.2 If yes, please complete the following:

| | | 1 Prior Year-End Statement Value | 2 Current Quarter Statement Value |
|-------|--|--|---|
| 14.21 | Bonds | \$ | \$ |
| 14.22 | Preferred Stock | \$ | \$ |
| 14.23 | Common Stock | \$ | \$ |
| 14.24 | Short-term Investments | \$ | \$ |
| 14.25 | Mortgages, Loans or Real Estate | \$ | \$ |
| 14.26 | All Other | \$ | \$ |
| 14.27 | Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)..... | \$0 | \$0 |
| 14.28 | Total Investment in Parent included in Lines 14.21 to 14.26 above | \$ | \$ |
| 14.29 | Receivable from Parent not included in Lines 14.21 to 14.26 above | \$ | \$ |

15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? Yes [] No [X]

15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No []

If no, attach a description with this statement.

16. Excluding items in Schedule E, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Part 1 - General, Section IV.H - Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? Yes [] No [X]

16.1 For all agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

| 1 Name of Custodian(s) | 2 Custodian Address |
|---------------------------|------------------------|
| | |

16.2 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

| 1 Name(s) | 2 Location(s) | 3 Complete Explanation(s) |
|------------------|---------------------|---|
| Mellon Bank..... | Pittsburgh, PA..... | The custodial agreement will be updated and amended to include a statement regarding notification of termination to state commissioner, reporting on internal controls, and language about adequate insurance coverage..... |

16.3 Have there been any changes, including name changes in the custodian(s) identified in 16.1 during the current quarter? Yes [] No [X]

16.4 If yes, give full and complete information relating thereto:

| 1 Old Custodian | 2 New Custodian | 3 Date of Change | 4 Reason |
|--------------------|--------------------|---------------------|-------------|
| | | | |

16.5 Identify all investment advisors, brokers/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

| 1 Central Registration Depository | 2 Name(s) | 3 Address |
|--------------------------------------|--------------|--------------|
| N/A..... | | |

SCHEDULE A - VERIFICATION

| | 1 | 2 |
|---|--------------|---------------------------------|
| | Year to Date | Prior Year Ended December 31 |
| 1. Book/adjusted carrying value, December 31 of prior year | NONE | |
| 2. Increase (decrease) by adjustment | | |
| 3. Cost of acquired | | |
| 4. Cost of additions to and permanent improvements | | |
| 5. Total profit (loss) on sales | | |
| 6. Increase (decrease) by foreign exchange adjustment | | |
| 7. Amount received on sales | | |
| 8. Book/adjusted carrying value at end of current period | | |
| 9. Total valuation allowance | | |
| 10. Subtotal (Lines 8 plus 9) | | |
| 11. Total nonadmitted amounts | | |
| 12. Statement value, current period (Page 2, real estate lines, current period) | | |

SCHEDULE B – VERIFICATION

| | 1 | 2 |
|--|--------------|---------------------------------|
| | Year to Date | Prior Year Ended December 31 |
| 1. Book/adjusted carrying value, December 31 of prior year | NONE | |
| 2. Amount loaned during period: | | |
| 2.1. Actual cost at time of acquisitions | | |
| 2.2. Additional investment made after acquisitions | | |
| 3. Accrual of discount and mortgage interest points and commitment fees | | |
| 4. Increase (decrease) by adjustment | | |
| 5. Total profit (loss) on sale | | |
| 6. Amounts paid on account or in full during the period | | |
| 7. Amortization of premium | | |
| 8. Increase (decrease) by foreign exchange adjustment | | |
| 9. Book value/recorded investment excluding accrued interest on mortgages owned at end of current period | | |
| 10. Total valuation allowance | | |
| 11. Subtotal (Lines 9 plus 10) | | |
| 12. Total nonadmitted amounts | | |
| 13. Statement value of mortgages owned at end of current period | | |

SCHEDULE BA – VERIFICATION

Other Invested Assets Included in Schedule BA

| | 1 | 2 |
|---|--------------|---------------------------------|
| | Year to Date | Prior Year Ended December 31 |
| 1. Book/adjusted carrying value, December 31 of prior year | NONE | |
| 2. Cost of acquisitions during period: | | |
| 2.1. Actual cost at time of acquisitions | | |
| 2.2. Additional investment made after acquisitions | | |
| 3. Accrual of discount | | |
| 4. Increase (decrease) by adjustment | | |
| 5. Total profit (loss) on sale | | |
| 6. Amounts paid on account or in full during the period | | |
| 7. Amortization of premium | | |
| 8. Increase (decrease) by foreign exchange adjustment | | |
| 9. Book/adjusted carrying value of long-term invested assets at end of current period | | |
| 10. Total valuation allowance | | |
| 11. Subtotal (Lines 9 plus 10) | | |
| 12. Total nonadmitted amounts | | |
| 13. Statement value of long-term invested assets at end of current period | | |

SCHEDULE D - VERIFICATION

| | 1 | 2 |
|--|--------------|---------------------------------|
| | Year to Date | Prior Year Ended December 31 |
| 1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year | 128,811,095 | 146,679,609 |
| 2. Cost of bonds and stocks acquired | 69,297,335 | 30,842,623 |
| 3. Accrual of discount | 396,739 | 431,569 |
| 4. Increase (decrease) by adjustment | 285,549 | (1,102,627) |
| 5. Increase (decrease) by foreign exchange adjustment | | 0 |
| 6. Total profit (loss) on disposal | 345,594 | 1,109,916 |
| 7. Consideration for bonds and stocks disposed of | 42,873,465 | 47,914,729 |
| 8. Amortization of premium | 364,579 | 1,235,266 |
| 9. Book/adjusted carrying value, current period | 155,898,268 | 128,811,095 |
| 10. Total valuation allowance | | 0 |
| 11. Subtotal (Lines 9 plus 10) | 155,898,268 | 128,811,095 |
| 12. Total nonadmitted amounts | | 0 |
| 13. Statement value (Lines 11 minus 12) | 155,898,268 | 128,811,095 |

STATEMENT AS OF SEPTEMBER 30, 2003 OF THE John Deere Health Plan, Inc.

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by Rating Class

| | 1 Book/Adjusted Carrying Value Beginning of Current Quarter | 2 Acquisitions During Current Quarter | 3 Dispositions During Current Quarter | 4 Non-Trading Activity During Current Quarter | 5 Book/Adjusted Carrying Value End of First Quarter | 6 Book/Adjusted Carrying Value End of Second Quarter | 7 Book/Adjusted Carrying Value End of Third Quarter | 8 Book/Adjusted Carrying Value December 31 Prior Year |
|-------------------------------------|---|--|--|---|---|--|---|---|
| BONDS | | | | | | | | |
| 1. Class 1 | 155,395,092 | 37,987,218 | 32,328,153 | 24,573 | 147,311,011 | 155,395,092 | 161,078,730 | 157,573,025 |
| 2. Class 2 | 3,908,919 | 982,630 | 995,643 | (5,553) | 5,910,418 | 3,908,919 | 3,890,353 | 5,081,550 |
| 3. Class 3 | 0 | | | | 934,800 | 0 | 0 | 985,584 |
| 4. Class 4 | 934,800 | | 991,046 | 56,246 | 0 | 934,800 | 0 | 0 |
| 5. Class 5 | 0 | | | | 0 | 0 | 0 | 0 |
| 6. Class 6 | 0 | | | | 0 | 0 | 0 | 0 |
| 7. Total Bonds | 160,238,811 | 38,969,848 | 34,314,842 | 75,266 | 154,156,229 | 160,238,811 | 164,969,083 | 163,640,159 |
| PREFERRED STOCK | | | | | | | | |
| 8. Class 1 | 0 | | | | 0 | 0 | 0 | 0 |
| 9. Class 2 | 0 | | | | 0 | 0 | 0 | 0 |
| 10. Class 3 | 0 | | | | 0 | 0 | 0 | 0 |
| 11. Class 4 | 0 | | | | 0 | 0 | 0 | 0 |
| 12. Class 5 | 0 | | | | 0 | 0 | 0 | 0 |
| 13. Class 6 | 0 | | | | 0 | 0 | 0 | 0 |
| 14. Total Preferred Stock | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 15. Total Bonds and Preferred Stock | 160,238,811 | 38,969,848 | 34,314,842 | 75,266 | 154,156,229 | 160,238,811 | 164,969,083 | 163,640,159 |

SCHEDULE DA - PART 1

| Short-Term Investments Owned End of Current Quarter | | | | | |
|---|---------------------------------|-----------|-------------|---|---------------------------------|
| | 1 | 2 | 3 | 4 | 5 |
| | Book/Adjusted Carrying Value | Par Value | Actual Cost | Amount of Interest Received Current Quarter | Paid for Accrued Interest |
| 8099999 Totals | 12,004,383 | XXX | 12,004,383 | 8,587 | |

SCHEDULE DA - PART 2- Verification

| Short-Term Investments Owned | | |
|---|--------------|---------------------------------|
| | 1 | 2 |
| | Year To Date | Prior Year Ended December 31 |
| 1. Book/adjusted carrying value, December 31 of prior year..... | 37,477,083 | 27,915,579 |
| 2. Cost of short-term investments acquired | 52,703,463 | 82,538,417 |
| 3. Increase (decrease) by adjustment | | 0 |
| 4. Increase (decrease) by foreign exchange adjustment | | 0 |
| 5. Total profit (loss) on disposal of short-term investments | | 0 |
| 6. Consideration received on disposal of short-term investments | 78,176,162 | 72,976,913 |
| 7. Book/adjusted carrying value, current period | 12,004,384 | 37,477,083 |
| 8. Total valuation allowance | | 0 |
| 9. Subtotal (Lines 7 plus 8) | 12,004,384 | 37,477,083 |
| 10. Total nonadmitted amounts | | 513,213 |
| 11. Statement value (Lines 9 minus 10) | 12,004,384 | 36,963,870 |
| 12. Income collected during period | 176,090 | 259,191 |
| 13. Income earned during period | 176,090 | 259,191 |

Schedule DB - Part F - Section 1

NONE

Schedule DB - Part F - Section 2

NONE

Schedule S

NONE

SCHEDULE T PREMIUMS AND OTHER CONSIDERATIONS

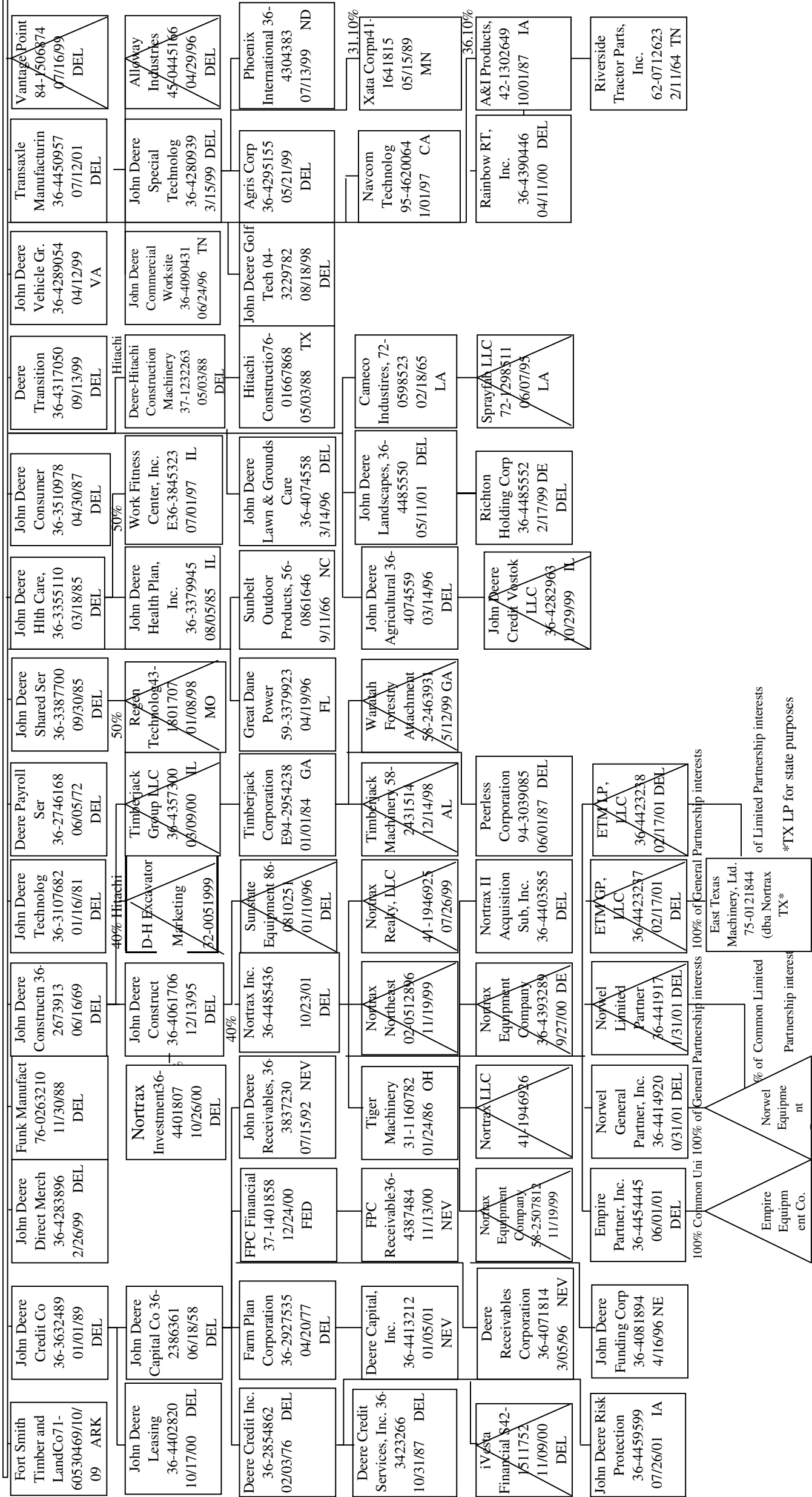
Allocated by States and Territories

| | | 1 | 2 | Direct Business Only Year-to-Date | | | | | |
|-----------------------------|---|------------------------------|-------------------------------------|-----------------------------------|----------------------|--------------------|---|---|----------------------------|
| | | | | 3 | 4 | 5 | 6 | 7 | 8 |
| States, Etc. | | Guaranty Fund (Yes or No) | Is Insurer Licensed? (Yes or No) | Accident and Health Premiums | Medicare Title XVIII | Medicaid Title XIX | Federal Employees Health Benefit Program Premiums | Life and Annuity Premiums and Deposit-Type Contract Funds | Property/Casualty Premiums |
| 1. Alabama | AL | | No | | | | | | |
| 2. Alaska | AK | | No | | | | | | |
| 3. Arizona | AZ | | No | | | | | | |
| 4. Arkansas | AR | | No | | | | | | |
| 5. California | CA | | No | | | | | | |
| 6. Colorado | CO | | No | | | | | | |
| 7. Connecticut | CT | | No | | | | | | |
| 8. Delaware | DE | | No | | | | | | |
| 9. District of Columbia | DC | | No | | | | | | |
| 10. Florida | FL | | No | | | | | | |
| 11. Georgia | GA | | No | | | | | | |
| 12. Hawaii | HI | | No | | | | | | |
| 13. Idaho | ID | | No | | | | | | |
| 14. Illinois | IL | Yes | Yes | 65,825,847 | 10,292 | | | | |
| 15. Indiana | IN | | No | | | | | | |
| 16. Iowa | IA | No | Yes | 149,175,522 | 1,667,043 | 39,272,130 | 6,619,255 | | |
| 17. Kansas | KS | | No | | | | | | |
| 18. Kentucky | KY | | No | | | | | | |
| 19. Louisiana | LA | | No | | | | | | |
| 20. Maine | ME | | No | | | | | | |
| 21. Maryland | MD | | No | | | | | | |
| 22. Massachusetts | MA | | No | | | | | | |
| 23. Michigan | MI | | No | | | | | | |
| 24. Minnesota | MN | | No | | | | | | |
| 25. Mississippi | MS | | No | | | | | | |
| 26. Missouri | MO | | No | | | | | | |
| 27. Montana | MT | | No | | | | | | |
| 28. Nebraska | NE | | No | | | | | | |
| 29. Nevada | NV | | No | | | | | | |
| 30. New Hampshire | NH | | No | | | | | | |
| 31. New Jersey | NJ | | No | | | | | | |
| 32. New Mexico | NM | | No | | | | | | |
| 33. New York | NY | | No | | | | | | |
| 34. North Carolina | NC | | No | | | | | | |
| 35. North Dakota | ND | | No | | | | | | |
| 36. Ohio | OH | | No | | | | | | |
| 37. Oklahoma | OK | | No | | | | | | |
| 38. Oregon | OR | | No | | | | | | |
| 39. Pennsylvania | PA | | No | | | | | | |
| 40. Rhode Island | RI | | No | | | | | | |
| 41. South Carolina | SC | No | No | | | | | | |
| 42. South Dakota | SD | | No | | | | | | |
| 43. Tennessee | TN | No | Yes | 106,619,191 | 76,473,136 | | | | |
| 44. Texas | TX | | No | | | | | | |
| 45. Utah | UT | | No | | | | | | |
| 46. Vermont | VT | | No | | | | | | |
| 47. Virginia | VA | No | Yes | 17,871,882 | 14,480,153 | | | | |
| 48. Washington | WA | | No | | | | | | |
| 49. West Virginia | WV | | No | | | | | | |
| 50. Wisconsin | WI | | No | | | | | | |
| 51. Wyoming | WY | | No | | | | | | |
| 52. American Samoa | AS | | | | | | | | |
| 53. Guam | GU | | | | | | | | |
| 54. Puerto Rico | PR | | | | | | | | |
| 55. U.S. Virgin Islands | VI | | | | | | | | |
| 56. Canada | CN | | | | | | | | |
| 57. Aggregate Other Alien | OT | XXX | XXX | 0 | 0 | 0 | 0 | 0 | 0 |
| 58. Total (Direct Business) | | XXX | (a) 4 | 339,492,441 | 92,630,623 | 39,272,130 | 6,619,255 | 0 | 0 |
| DETAILS OF WRITE-INS | | | | | | | | | |
| 5701. | | | | | | | | | |
| 5702. | | | | | | | | | |
| 5703. | | | | | | | | | |
| 5798. | Summary of remaining write-ins for Line 57 from overflow page | | | 0 | 0 | 0 | 0 | 0 | 0 |
| 5799. | Totals (Lines 5701 thru 5703 plus 5798) (Line 57 above) | | | 0 | 0 | 0 | 0 | 0 | 0 |

(a) Insert the number of yes responses except for Canada and Other Alien.

STATEMENT AS OF SEPTEMBER 30, 2003 OF THE John Deere Health Plan, Inc.

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART



SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of **NO** to the specific interrogatory will be accepted in lieu of filing on "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory question.

RESPONSE

1. Will the SVO Compliance Certification be filed with this statement?

.....Yes.....

Explanation:

Bar Code:

OVERFLOW PAGE FOR WRITE-INS

MQ003 Additional Aggregate Lines for Page 03 Line 21.

| | | | | |
|-------|---|---------|---|---------|
| *LIAB | | | | |
| 2104. | Other Accounts Payable..... | 141,716 | | 141,716 |
| 2197. | Summary of remaining write-ins for Line 21 from Page 03 | 141,716 | 0 | 141,716 |

Schedule A - Part 2

NONE

Schedule A - Part 3

NONE

Schedule B - Part 1

NONE

Schedule B - Part 2

NONE

Schedule BA - Part 1

NONE

Schedule BA - Part 2

NONE

STATEMENT AS OF SEPTEMBER 30, 2003 OF THE John Deere Health Plan, Inc.

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired by the Company During the Current Quarter

| 1 CUSIP Identification | 2 Description | 3 Date Acquired | 4 Name of Vendor | 5 Number of Shares of Stock | 6 Actual Cost | 7 Par Value | 8 Paid for Accrued Interest and Dividends | 9 NAIC Designation ^(a) |
|---|---|--------------------|------------------------------|-----------------------------------|---------------------|----------------|---|---|
| BONDS | | | | | | | | |
| US Governments | | | | | | | | |
| United States | | | | | | | | |
| 3133MW-M3-2 | Federal Home Loan Bank US\$ Cost = 998,125 5.300% 03/13/18 | 07/21/2003 | Legg Mason | | 998,125 | 1,000,000 | 18,992 | 1 |
| 3133X0-ZE-2 | Federal Home Loan Bank US\$ Cost = 1,000,000 4.000% 09/23/10 | 09/03/2003 | NBC Capital Markets Group | | 1,000,000 | 1,000,000 | | 1 |
| 912828-BH-2 | U.S. Treasury US\$ Cost = 1,980,938 4.250% 08/15/13 | 08/11/2003 | NBC Capital Markets Group | | 1,980,938 | 2,000,000 | | 1 |
| Total United States | | | | | 3,979,063 | 4,000,000 | 18,992 | XXX |
| 0399999 - Total - Bonds - U.S. Government | | | | | 3,979,063 | 4,000,000 | 18,992 | XXX |
| Special Revenue & Assessment | | | | | | | | |
| United States | | | | | | | | |
| 31392J-P9-4 | FNMA 2003-21 QD US\$ Cost = 1,000,000 5.500% 07/25/28 | 08/01/2003 | Paine Webber (Bonds) | | 1,000,000 | 1,000,000 | 764 | 1 |
| 31392J-ZL-6 | FNMA 2003-17 QT US\$ Cost = 1,005,156 5.000% 08/25/27 | 09/17/2003 | Vining Sparks | | 1,005,156 | 1,000,000 | 2,917 | 1 |
| 31393C-JN-4 | FNMA 2003-54 PE US\$ Cost = 1,005,625 5.000% 07/25/12 | 09/19/2003 | Paine Webber (Bonds) | | 1,005,625 | 1,000,000 | 3,194 | 1 |
| 31393E-X6-1 | FNMA 2003-85 QB US\$ Cost = 1,023,281 5.500% 09/25/29 | 09/22/2003 | Legg Mason | | 1,023,281 | 1,000,000 | 3,667 | 1 |
| 31394H-DU-2 | FHLMC 2665 WC US\$ Cost = 1,031,563 5.500% 10/15/29 | 09/24/2003 | Salomon Smith Barney (Bonds) | | 1,031,563 | 1,000,000 | 3,819 | 1 |
| 383730-XJ-5 | GNMA 2003-40 NB US\$ Cost = 1,017,500 5.000% 12/20/28 | 07/18/2003 | NBC Capital Markets Group | | 1,017,500 | 1,000,000 | 3,056 | 1 |
| 38374B-E7-4 | GNMA 2003-70 MB US\$ Cost = 1,033,906 5.500% 07/20/33 | 09/18/2003 | NBC Capital Markets Group | | 1,033,906 | 1,000,000 | 3,361 | 1 |
| 880591-DW-9 | Tennessee Valley Authority US\$ Cost = 987,000 4.750% 08/01/13 | 08/04/2003 | NBC Capital Markets Group | | 987,000 | 1,000,000 | 528 | 1 |
| Total United States | | | | | 8,104,031 | 8,000,000 | 21,306 | XXX |
| 3199999 - Total - Bonds - Special Revenue | | | | | 8,104,031 | 8,000,000 | 21,306 | XXX |
| Industrial & Miscellaneous | | | | | | | | |
| United States | | | | | | | | |
| 013817-AF-8 | Alcoa Inc. US\$ Cost = 1,084,930 6.000% 01/15/12 | 09/18/2003 | Legg Mason | | 1,084,930 | 1,000,000 | 11,333 | 1 |
| 025816-AQ-2 | American Express Co. US\$ Cost = 1,008,410 4.875% 07/15/13 | 09/19/2003 | Legg Mason | | 1,008,410 | 1,000,000 | 8,125 | 1 |
| 032166-AQ-3 | Amsouth Bancorporation US\$ Cost = 982,630 4.850% 04/01/13 | 08/01/2003 | Legg Mason | | 982,630 | 1,000,000 | 17,379 | 2 |
| 20825U-AB-0 | Conoco Funding Co. US\$ Cost = 570,687 6.350% 10/15/11 | 09/18/2003 | Salomon Smith Barney (Bonds) | | 570,687 | 513,000 | 14,297 | 1 |
| 46625H-AT-7 | J P Morgan Chase & Co US\$ Cost = 1,058,820 5.750% 01/02/13 | 09/19/2003 | Legg Mason | | 1,058,820 | 1,000,000 | 13,097 | 1 |
| 494368-AX-1 | Kimberly-Clark Corp. US\$ Cost = 998,730 5.000% 08/15/13 | 07/31/2003 | Salomon Smith Barney (Bonds) | | 998,730 | 1,000,000 | | 1PE |
| 589331-AH-0 | Merck & Co. Inc. US\$ Cost = 989,120 4.375% 02/15/13 | 09/23/2003 | Legg Mason | | 989,120 | 1,000,000 | 4,983 | 1 |
| 61744A-AN-0 | Morgan Stanley US\$ Cost = 499,975 4.250% 05/15/10 | 09/23/2003 | Legg Mason | | 499,975 | 500,000 | 8,205 | 1 |
| 670346-AE-5 | Nucor Corp. US\$ Cost = 998,170 4.875% 10/01/12 | 09/11/2003 | NBC Capital Markets Group | | 998,170 | 1,000,000 | 22,344 | 1 |
| 72447W-AA-7 | Pitney Bowes Inc US\$ Cost = 976,820 4.750% 05/15/18 | 07/21/2003 | Legg Mason | | 976,820 | 1,000,000 | 11,215 | 1PE |
| 811054-AC-9 | Scripps (E.W.) Co. (Ohio) US\$ Cost = 1,053,500 5.750% 07/15/12 | 09/04/2003 | NBC Capital Markets Group | | 1,053,500 | 1,000,000 | 8,625 | 1PE |
| 925524-AT-7 | Viacom Inc. US\$ Cost = 1,068,040 5.625% 08/15/12 | 09/19/2003 | Legg Mason | | 1,068,040 | 1,000,000 | 6,094 | 1 |
| 929766-AA-9 | Wachovia Corp. US\$ Cost = 484,545 5.000% 08/18/15 | 07/29/2003 | Salomon Smith Barney (Bonds) | | 484,545 | 500,000 | 417 | 1PE |
| Total United States | | | | | 11,774,377 | 11,513,000 | 126,114 | XXX |
| 4599999 - Total - Bonds - Industrial, Misc. | | | | | 11,774,377 | 11,513,000 | 126,114 | XXX |
| 6099997 - Total - Bonds - Part 3 | | | | | 23,857,471 | 23,513,000 | 166,411 | XXX |
| 6099999 - Total - Bonds | | | | | 23,857,471 | 23,513,000 | 166,411 | XXX |
| 6599999 - Total - Preferred Stocks | | | | | 0 | XXX | 0 | XXX |
| COMMON STOCK | | | | | | | | |
| Industrial & Miscellaneous | | | | | | | | |
| United States | | | | | | | | |
| 58405U-10-2 | Medco Health Solutions, Inc. Common Stock US\$ Cost = 2,506 | 09/02/2003 | Spin Off | 458,280 | 2,506 | | 0 | L |
| Total United States | | | | | 2,506 | XXX | 0 | XXX |
| 6899999 - Total - Common Stocks - Industrial, Misc. | | | | | 2,506 | XXX | 0 | XXX |
| 7099997 - Total - Common Stocks - Part 3 | | | | | 2,506 | XXX | 0 | XXX |
| 7099999 - Total - Common Stocks | | | | | 2,506 | XXX | 0 | XXX |
| 7199999 - Total - Preferred and Common Stocks | | | | | 2,506 | XXX | 0 | XXX |
| 7299999 - Totals | | | | | 23,859,977 | XXX | 166,411 | XXX |

(a) For all common stock bearing the NAIC designation "U" provide: the number of such issues

STATEMENT AS OF SEPTEMBER 30, 2003 OF THE John Deere Health Plan, Inc.

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of by the Company During the Current Quarter

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 |
|------------------------------------|---|------------------|-------------------|---------------------------------|---------------|-----------|-------------|---|--|--|---|--|-------------------------------------|--|--|---------------------------------|
| CUSIP Identi- fication | Description | Disposal Date | Name of Purchaser | Number of Shares of Stock | Consideration | Par Value | Actual Cost | Book/Adjusted Carrying Value at Disposal Date | Increase (Decrease) by Adjustment | Increase (Decrease) by Foreign Exchange Adjustment | Foreign Exchange Gain (Loss) on Disposal | Realized Gain (Loss) on Disposal | Total Gain (Loss) on Disposal | Interest on Bonds Received During Year | Dividends on Stocks Received During Year | NAIC Desig- nation (a) |
| BONDS | | | | | | | | | | | | | | | | |
| US Governments | | | | | | | | | | | | | | | | |
| United States | | | | | | | | | | | | | | | | |
| 3128X0-TA-7 | Freddie Mac US\$ Cost = 1,000,000 3.750% 12/26/07 | 06/26/2003 | Call | 100.0000 | 1,000,000 | 1,000,000 | 1,000,000 | 1,000,000 | | | | | .0 | 18,750 | | 1 |
| 3133MX-4J-5 | Federal Home Loan Bank US\$ Cost = 996,250 3.000% 09/27/11 | 06/27/2003 | Call | 100.0000 | 1,000,000 | 1,000,000 | 996,250 | 1,000,648 | 4,398 | | | (648) | (648) | 7,500 | | 1 |
| 3133MX-6D-6 | Federal Home Loan Bank US\$ Cost = 998,750 3.000% 09/27/11 | 06/27/2003 | Call | 100.0000 | 1,000,000 | 1,000,000 | 998,750 | 1,003,209 | 4,459 | | | (3,209) | (3,209) | 7,500 | | 1 |
| 36217L-FH-4 | GNMA Pool #0196468 US\$ Cost = 4,488 10.000% 11/15/04 | 09/01/2003 | Paydown | | 4,346 | 4,346 | 4,488 | 4,355 | (9) | | | | .0 | 73 | | 1 |
| 36218S-SV-3 | GNMA Pool #0231032 US\$ Cost = 153 9.000% 07/15/17 | 09/01/2003 | Paydown | | 154 | 154 | 153 | 153 | 1 | | | | .0 | 2 | | 1 |
| 36220E-5X-1 | GNMA Pool #0276362 US\$ Cost = 2,610 9.500% 09/15/04 | 09/01/2003 | Paydown | | 2,547 | 2,547 | 2,610 | 2,556 | (9) | | | | .0 | 52 | | 1 |
| 36220N-VU-8 | GNMA Pool #0283327 US\$ Cost = 7,683 9.000% 12/15/19 | 09/01/2003 | Paydown | | 7,679 | 7,679 | 7,683 | 7,680 | (1) | | | | .0 | 107 | | 1 |
| 36220Y-KL-6 | GNMA Pool #0291999 US\$ Cost = 6,666 9.000% 10/15/05 | 09/01/2003 | Paydown | | 6,644 | 6,644 | 6,666 | 6,634 | 9 | | | | .0 | 88 | | 1 |
| 912827-L8-3 | U S Treasury Note US\$ Cost = 1,499,063 5.750% 08/15/03 | 08/15/2003 | Maturity | | 1,500,000 | 1,500,000 | 1,499,063 | 1,499,821 | 179 | | | | .0 | 43,125 | | 1 |
| Total United States | | | | | 4,521,370 | 4,521,370 | 4,515,663 | 4,525,057 | 9,027 | 0 | 0 | (3,857) | (3,857) | 77,197 | XXX | XXX |
| 0399999 - Bonds - U.S. Governments | | | | | 4,521,370 | 4,521,370 | 4,515,663 | 4,525,057 | 9,027 | 0 | 0 | (3,857) | (3,857) | 77,197 | XXX | XXX |
| Special Revenue & Assessment | | | | | | | | | | | | | | | | |
| United States | | | | | | | | | | | | | | | | |
| 312911-T8-3 | FHLMC 1369- H US\$ Cost = 125,524 6.500% 09/15/07 | 09/01/2003 | Paydown | | 130,077 | 130,077 | 125,524 | 128,684 | 1,393 | | | | .0 | 1,422 | | 1 |
| 312912-KD-9 | FHLMC 1385-H US\$ Cost = 111,348 6.500% 08/15/07 | 09/01/2003 | Paydown | | 113,336 | 113,336 | 111,348 | 112,346 | 990 | | | | .0 | 1,235 | | 1 |
| 312913-4Q-6 | FHLMC 1449 H US\$ Cost = 115,088 7.000% 12/15/07 | 09/01/2003 | Paydown | | 116,730 | 116,730 | 115,088 | 115,770 | 959 | | | | .0 | 1,376 | | 1 |
| 312914-H8-0 | FHLMC 1480-LE US\$ Cost = 407,346 6.500% 07/15/08 | 09/01/2003 | Paydown | | 404,753 | 404,753 | 407,346 | 405,792 | (1,039) | | | | .0 | 4,109 | | 1PE |
| 312915-DN-8 | FHLMC 1490- PH US\$ Cost = 120,406 6.250% 04/15/08 | 09/01/2003 | Paydown | | 122,027 | 122,027 | 120,406 | 121,077 | 950 | | | | .0 | 1,258 | | 1 |
| 3133T3-TB-4 | FHLMC 1658 GB US\$ Cost = 124,533 7.000% 08/15/05 | 09/01/2003 | Paydown | | 119,421 | 119,421 | 124,533 | 122,932 | (3,511) | | | | .0 | 1,396 | | 1 |
| 3133T4-BX-3 | FHLMC-GNMA 1687 J US\$ Cost = 255,415 6.500% 02/15/09 | 09/01/2003 | Paydown | | 262,132 | 262,132 | 255,415 | 258,990 | 3,141 | | | | .0 | 2,888 | | 1 |
| 3133T6-QQ-7 | FHLMC 1808-A US\$ Cost = 69,463 5.000% 10/15/07 | 09/01/2003 | Paydown | | 74,026 | 74,026 | 69,463 | 70,876 | 3,150 | | | | .0 | 602 | | 1 |
| 3133TC-DZ-8 | FHLMC 2013 PA US\$ Cost = 157,833 5.500% 09/15/11 | 09/01/2003 | Paydown | | 161,621 | 161,621 | 157,833 | 160,090 | 1,531 | | | | .0 | 1,475 | | 1 |
| 3133TE-B5-2 | FHLMC 2063-PE US\$ Cost = 464,013 5.750% 07/15/26 | 09/01/2003 | Paydown | | 476,674 | 476,674 | 464,013 | 465,431 | 11,243 | | | | .0 | 4,591 | | 1 |
| 3133TR-5M-3 | FHLMC 2280-VA US\$ Cost = 26,326 6.000% 06/15/07 | 09/01/2003 | Paydown | | 25,853 | 25,853 | 26,326 | 26,212 | (359) | | | | .0 | 259 | | 1 |
| 3133TT-M8-1 | FHLMC 2315 K US\$ Cost = 346,076 6.000% 05/15/11 | 09/01/2003 | Paydown | | 353,393 | 353,393 | 346,076 | 347,083 | 6,309 | | | | .0 | 4,735 | | 1 |
| 3133TT-NU-1 | FHLMC 2314 PB US\$ Cost = 672,452 6.500% 04/15/27 | 08/01/2003 | Paydown | | 672,872 | 672,872 | 672,452 | 672,235 | 637 | | | | .0 | 4,620 | | 1PE |
| 3133TV-DD-5 | FHLMC 2356 GB US\$ Cost = 531,013 6.000% 08/15/13 | 09/01/2003 | Paydown | | 507,767 | 507,767 | 531,013 | 528,679 | (20,913) | | | | .0 | 6,321 | | 1 |
| 31358T-TB-5 | FNMA 1993-014- A US\$ Cost = 21,654 6.000% 02/25/08 | 09/01/2003 | Paydown | | 21,797 | 21,797 | 21,654 | 21,674 | 122 | | | | .0 | 219 | | 1 |
| 31359A-EG-0 | FNMA 1993-93 G US\$ Cost = 63,192 6.750% 05/25/08 | 09/01/2003 | Paydown | | 62,868 | 62,868 | 63,192 | 62,950 | (82) | | | | .0 | 701 | | 1 |

E05.1

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of by the Company During the Current Quarter

(a) For all common stock bearing the NAIC designation "U" provide: the number of such issues

Schedule DB - Part A - Section 1

NONE

Schedule DB - Part B - Section 1

NONE

Schedule DB - Part C - Section 1

NONE

Schedule DB - Part D - Section 1

NONE

Schedule E - Part 1

NONE